PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								Application or Docket Number /					
								50107-485					
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMAL	SMALL ENTITY TYPE		OR	OTHER THAN		
TOTAL CLAIMS			29				RAT	Έ	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA	BASIC	BASIC FEE		OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			22 minus 20=		•	2	X\$ 9=			OR	X\$18≃	36 -	
INDEPENDENT CLAIMS			5 minus 3 =		•	2	X40=			OR	X80=		
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+135=		OR	+270=	160	
* If the difference in column 1 is less than zero, enter "0" in column 2						TOT			OR	TOTAL	48		
6	15/2	LAIMS AS A	MENDED			(0.1			ENTITY	OR	OTHER	THAN	
AMENDMENT A		(Column 1)		(Çolun High		(Column 3)	SMA		ADDI-		SMALL	ADDI-	
		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA	RAT	Έ	TIONAL		RATE	TIONAL	
	Total	.24	Minus	. 5	12	= 🔾	X\$ 9	<b>)</b> =		OR	X\$18=		
	Independent	. 5	Minus	<sup>2</sup>	5_	=	X40	)=		OR	X80=		
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN'	TCLAIM		40				.070		
							+13	)TAL		OR	+270= TOTAL		
								FEE	,	OR	ADDIT. FEE		
		(Column 1)	-	_	mn 2)	(Column 3)							
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAI FEE	
	Total	•	Minus	••		=	X\$ !	)=		OR	X\$18=		
	Independent	•	Minus	•••		=	X40	) <u> </u>		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								· · ·			<del></del>	
							+13	5=		OR	+270=		
	A A							TAL FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)			mn 2)	(Column 3)					•		
NT C	and the second of an area.	CLAIMS REMAINING AFTER	TO STATE OF THE ST	NUM	KEST IBER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL		RATE	ADDI- TIONA	
IZ.		AMENDMENT			FOR	1			CCC	•	1	CEE	

FORM PTO-875 (Rev. 8/00)

AMENDMI

Total

Independent

Minus

Minus

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1.

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

OR

OR

OR

X\$18=

X80=

+270=

TOTAL ADDIT. FEE

X\$ 9<sup>1</sup>

X40=

+135=